



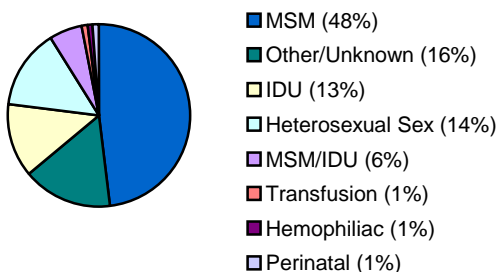
HIV/AIDS, STD & TB Prevention ALASKA

HIV/AIDS Epidemic

Alaska reported 565 cumulative AIDS cases to CDC as of December 2003.

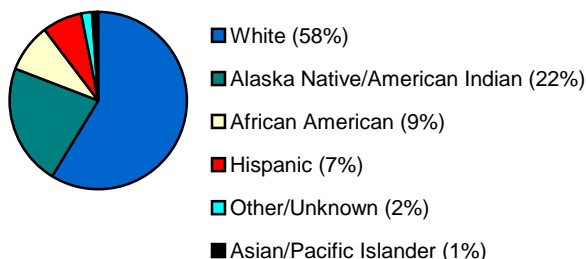
Cumulative Reported HIV/AIDS Cases by Mode of Exposure, through 2003 N = 925

SOURCE: Alaska Health Department of Health and Social Services



Cumulative Reported HIV/AIDS Cases by Race/Ethnicity, through 2003 N = 925

SOURCE: Alaska Department of Health and Social Services



Sexually Transmitted Diseases (STDs)

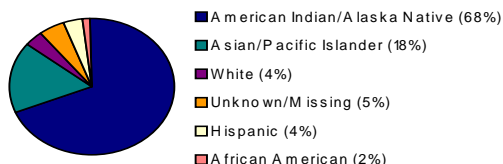
Syphilis

Primary and secondary (P&S) syphilis (the stages when syphilis is most infectious) remains a problem in the southern U.S. and some urban areas. In Alaska, the rate of P&S syphilis increased 300% from 1995-2004.

- Alaska ranked 29th among the 50 states with 1.2 cases of P&S syphilis per 100,000 persons.
- There were no cases of congenital syphilis reported from 1995 to 2004.

TB Cases by Race/Ethnicity, through 2003 N = 57

SOURCE: CDC, 2003 TB Surveillance Report



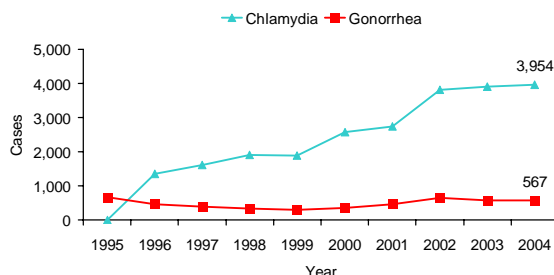
Chlamydia and Gonorrhea

Chlamydial and gonorrheal infections in women are usually asymptomatic and often go undiagnosed. Untreated, these infections can lead to pelvic inflammatory disease (PID), which can cause tubal infertility, ectopic pregnancy, and chronic pelvic pain.

- Alaska ranked 26th among the 50 states in chlamydial infections (609.4 per 100,000 persons) and 30th in gonorrhea infections (89 per 100,000 persons).
- The rate of chlamydia among Alaska women (851.9 cases per 100,000 females) was 2.2 times greater than among Alaska men (382.7 cases per 100,000 males).

Chlamydia and Gonorrhea Cases in Alaska, 1995-2004

SOURCE: CDC, 2004 STD Surveillance Report

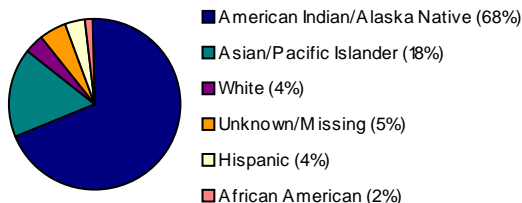


Tuberculosis

TB Cases by Race/Ethnicity, through 2003

N = 57

SOURCE: CDC, 2003 TB Surveillance Report



Although rates of tuberculosis (TB) infection in the U.S. have declined substantially since 1992, rates among foreign-born persons continued to increase. In 2003, Alaska reported

- The 3rd highest rate of TB in the U.S.
- A total of 57 TB cases with 68% affecting American Indian/Alaska Natives and 18% affecting Asian/ Pacific Islanders. In all, about 28% were among foreign-born individuals.

Program Initiatives Supported by CDC

HIV/AIDS

The Alaska Native Tribal Health Consortium is a community-based organization (CBO) that aims to increase public awareness throughout rural Alaska on the need for HIV testing and the continuum of care for positive individuals, and to increase HIV testing among Alaska Natives and American Indians. The program accomplishes these goals by improving information about test-taking behaviors of Alaska Native people and by providing culturally responsive, comprehensive training/technical assistance services that are village-focused and adequately involve all stakeholders.

Sexually Transmitted Diseases (STDs)

The Alaska STD Program reported eight primary and secondary (P&S) and one early latent cases of syphilis beginning in the fourth quarter of 2004; all reported men having sex with men as the primary risk factor. These cases represented the first instances of indigenous spread in Alaska since 1995. Community-based organizations (CBOs) that serve high-risk populations have been alerted and provided STD education, and a culturally-appropriate marketing campaign is being developed. Expedited reporting from laboratories is encouraged and providers receive epidemiology bulletins on infectious syphilis and the increase noted within the state.

National Center for HIV, STDs & TB Prevention Funding to Alaska, 2005 (US\$)

HIV/AIDS	\$1,937,582
STDs	\$449,007
TB	\$323,499

Tuberculosis (TB)

Most Native Alaskans reside in remote, rural villages in the north and southwest part of the state. Often, there are difficulties in responding quickly to TB outbreaks in a state of this size and climate. A village trip by public health nurses to perform a TB contact investigation takes several weeks of planning, and the costs associated with hiring charter aircraft are significant. If the villagers who need TB testing are not available on the dates that the public health nurses are working in the village, then they may not be tested for many months until the next visit.

Health Officials

Alaska Health Official: Richard Mandsager, MD

Email: richard_mandsager@health.state.ak.us **Phone:** (907) 465-3092

AIDS Director:

Wendy Craytor

Alaska Department of Health and Social Services
PO Box 240249
Anchorage, AK 99524
(907) 269-8058

wendy_craytor@epi.hss.state.ak.us

STD Director:

Donna Cecere

Alaska Department of Health and Social Services
PO Box 240249
Anchorage, AK 99524
(907) 269-8056

donna_cecere@health.state.ak.us

TB Controller:

Elizabeth Funk

Alaska Department of Health and Social Services
Section of Epidemiology
Anchorage, AK 99524-0249
(907) 269-8000

beth_funk@epi.hss.state.ak.us